

REGION: 04
STATE : GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE: 125
RUN DATE: 01/09/86
RUN TIME: 10:01:20

M.2 - SITE MAINTENANCE FORM

47012

EPA ID : GAD048711972		* ACTION: _	*
SITE NAME: MOBIL CHEMICAL CO CHEMICAL COATING DIV	SOURCE: H	* _____	*
STREET : 9172 INDUSTRIAL DR	CONG DIST: 10	* _____	*
CITY : COVINGTON	ZIP: 30209	* _____	*
CNTY NAME: NEWTON	CNTY CODE : 217	* _____	*
LATITUDE : 33/36/50.0	LONGITUDE : 083/50/21.0	* _/_/_.	*
LL-SOURCE: G	LL-ACCURACY:	* _	*
SMSA : 0520	HYDRO UNIT: 03070103	* _____	*
INVENTORY IND: Y REMEDIAL IND: Y REMOVAL IND: N FED FAC IND: N		* _ _ _ _	*
NPL IND: N NPL LISTING DATE:	NPL DELISTING DATE:	* _ _/_ _/_	*
SITE/SPILL IDS:		* _ _ _ _	*
RPM NAME: RAY WILKERSON	RPM PHONE: 404-347-2234	* _____	*
SITE CLASSIFICATION:	SITE APPROACH:	* _	*
DIOXIN TIER:	REG FLD1:	REG FLD2: 6	* _ _
RESP TERM: PENDING () NO FURTHER ACTION ()		* PENDING (_) NO FURTHER ACTION (_)	*
ENF DISP: NO VIABLE RESP PARTY () VOLUNTARY RESPONSE ()		* _ _	*
ENFORCED RESPONSE () COST RECOVERY ()		* _ _	*
SITE DESCRIPTION:		* _____	*
		* _____	*
		* _____	*
		* _____	*

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C E R C L I S V 1.2

PAGE: 126
RUN DATE: 01/09/86
RUN TIME: 10:01:20

M.2 - PROGRAM MAINTENANCE FORM

SITE: MOBIL CHEMICAL CO CHEMICAL COATING DIV

EPA ID: GAD048711972 PROGRAM CODE: M01 PROGRAM TYPE:

PROGRAM QUALIFIER: ALIAS LINK :

PROGRAM NAME: SITE EVALUATION

DESCRIPTION:

* ACTION: _

*

*

*

*

*

*

*

REGION: 04
STATE : GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE: 127
RUN DATE: 01/09/86
RUN TIME: 10:01:20

M.2 - EVENT MAINTENANCE FORM

* ACTION: _

SITE: MOBIL CHEMICAL CO CHEMICAL COATING DIV
PROGRAM: SITE EVALUATION

EPA ID: GAD048711972 PROGRAM CODE: H01 EVENT TYPE: DS1

FMS CODE: EVENT QUALIFIER : EVENT LEAD: E

EVENT NAME: DISCOVERY STATUS:

DESCRIPTION:

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

ORIGINAL	CURRENT	ACTUAL
START:	START:	START:
COMP :	COMP :	COMP : 08/01/80

* _/_/_ _/_/_ _/_/_ _/_/_ _/_/_ *

* _/_/_ _/_/_ _/_/_ _/_/_ _/_/_ *

HQ COMMENT:

* _ _ _ _ _ *

* _ _ _ _ _ *

RG COMMENT:

COOP ACR #	AMENDMENT #	STATUS	STATE %
			0

* _ _ _ _ _ *

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PAGE: 128
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M.2 - EVENT MAINTENANCE FORM

* ACTION: _

SITE: MOBIL CHEMICAL CO CHEMICAL COATING DIV
PROGRAM: SITE EVALUATION

EPA ID: GAD048711972 PROGRAM CODE: H01 EVENT TYPE: PA1

FMS CODE: EVENT QUALIFIER : EVENT LEAD: S

EVENT NAME: PRELIMINARY ASSESSMENT STATUS:

DESCRIPTION:

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

ORIGINAL

CURRENT

ACTUAL

START: START: START: 12/27/85

COMP : COMP : COMP : 12/30/85

* _/_/_ _/_/_ _/_/_ *

* _/_/_ _/_/_ _/_/_ *

HQ COMMENT:

* _ _ _ _ _ *

RG COMMENT:

* _ _ _ _ _ *

COOP ACR # AMENDMENT # STATUS STATE %

0

* _ _ _ _ _ *

REGION: 04
STATE : GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE: 129
RUN DATE: 01/09/86
RUN TIME: 10:01:20

M.2 - COMMENT MAINTENANCE FORM

SITE: MOBIL CHEMICAL CO CHEMICAL COATING DIV

EPA ID: GAD048711972

COM
NO COMMENT

ACTION

001 PART A- ON FILE

*	-	_____	*
*		_____	*

PRELIMINARY ASSESSMENT COVER SHEET
MOBIL CHEMICAL CO. - CHEMICAL PRODUCTS DIVISION
GAD048711972

I. HISTORY OF SITE

The Mobil Chemical Company - Chemical Products Division Site (currently known as The Valspar Corporation) is located at 9172 Industrial Drive in Covington, Georgia 30209. This facility has manufactured clear lacquer coatings for the food and beverage industries since 1973. The wastes generated by the facility are spent solvents. From August 1973 until January 1983 solvents were shipped to Mobil Chemical Company in Rochester, Pennsylvania for recycling. From 1983 to the present, solvent wastes have been sent to Oldover Corporation of Minneapolis, Minnesota. Prior to this transfer, the Mobil Chemical Company - Chemical Products Division had withdrawn its Part A application and was classified as a generator of hazardous waste.

II. NATURE OF HAZARDOUS MATERIALS

The only hazardous material generated by this facility is spent methyl ethyl ketone. Approximately 1,100 gallons are shipped off-site for recycling every 90 days.

III. DESCRIPTION OF HAZARDOUS CONDITIONS, INCIDENTS, PERMIT VIOLATIONS

According to Mr. Dominic Grenci, Manager, Environmental Affairs for Mobil Chemical Company, no spills have ever occurred at this facility and no on-site disposal has occurred.

IV. ROUTES OF CONTAMINATION

None

V. POSSIBLE AFFECTED POPULATION AND RESOURCES

None

VI. RECOMMENDATIONS AND JUSTIFICATIONS

Since no treatment, storage or disposal has taken place on-site and there have been no violations or spills, this site is assessed a "None" priority for a site inspection.

VII. REFERENCE TO SUPPORTING DATA SOURCES

1. EPA 3510-1, 3510-3 (6/80) Form 11/18/80.
2. Trip Report 5/12/77.

3. Letter, 5/23/77, Re: Recycling of Waste Solvents.
4. Letter, 8/24/83, RE: Withdrawal of Part A Application for Mobil Chemical Company - Chemical Products Division.
5. Action Report, 5/11/82
6. Letter, 12/28/82, RE: Hazardous Waste - Transporting.
7. Generator Annual Hazardous Waste Report 1981, 1982, 1983.
8. Letter, 6/2/83, RE: Acknowledgement of Withdrawal and Status Change to Generator - from GA EPD.
9. Waste Management Data Sheet, 2/13/84.
10. Letter, 7/20/84, RE: Notification of Ownership Change.
11. Notification of Hazardous Waste Activity for Valspar Corp, 7/24/84.
12. Georgia Annual Hazardous Waste Report for Valspar Corp., 1/9/85.
13. Telephone Conversation Record, 10/24/85.

GAK/mcw033

File - Mobil Chemical Co. - Chemical Products Division



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D048711972

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Mobil Chemical Co.-Chem. Prod. Division		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 9172 Industrial Drive			
03 CITY Covington	04 STATE GA	05 ZIP CODE 30209	06 COUNTY Newton	07 COUNTY CODE 217	08 CONG DIST 04
09 COORDINATES LATITUDE 33° 36' 50.0"N		LONGITUDE 083° 50' 21.0"W		Currently known as: The Valspar Corporation	
10 DIRECTIONS TO SITE (Starting from nearest public road) From the intersection of US Route 278 and Industrial Blvd., proceed north on Industrial Blvd. for 1.0 mile. Facility is on your right.					

III. RESPONSIBLE PARTIES

01 OWNER (If known) Valspar Corporation		02 STREET (Business, mailing, residential) P. O. Box 1461			
03 CITY Minneapolis	04 STATE MN	05 ZIP CODE 55415	06 TELEPHONE NUMBER (612) 332-7371		
07 OPERATOR (If known and different from owner) Same as above		08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()		
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input checked="" type="checkbox"/> A. RCRA 3001 DATE RECEIVED: 11/18/80 <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ <input type="checkbox"/> C. NONE MONTH DAY YEAR MONTH DAY YEAR					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 05/09/77 MONTH DAY YEAR <input type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION 1973 present <input type="checkbox"/> UNKNOWN BEGINNING YEAR ENDING YEAR			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED Spent solvents - methyl ethyl ketone, shipped off-site.					

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

None

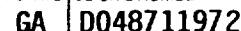
V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one if high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (inspection required promptly) <input type="checkbox"/> B. MEDIUM (inspection required) <input type="checkbox"/> C. LOW (inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (no further action needed, complete current disposition form)			
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VI. INFORMATION AVAILABLE FROM

01 CONTACT Dominic A. Grenci		02 OF (Agency Organization) The Valspar Corporation		03 TELEPHONE NUMBER Ext. 333 (201) 467-8500	
04 PERSON RESPONSIBLE FOR ASSESSMENT Gilda A. Knowles G.A.K.		05 AGENCY DNR-EPD	06 ORGANIZATION RAU	07 TELEPHONE NUMBER (404) 656-7404	08 DATE 11/04/85 MONTH DAY YEAR

J. Suorve



<input checked="" type="checkbox"/> A TOXIC	<input type="checkbox"/> E SOLUBLE	<input type="checkbox"/> I HIGHLY VOLATILE
<input type="checkbox"/> B CORROSIVE	<input type="checkbox"/> F INFECTIOUS	<input type="checkbox"/> J EXPLOSIVE
<input type="checkbox"/> C RADIOACTIVE	<input type="checkbox"/> G FLAMMABLE	<input type="checkbox"/> K REACTIVE
<input type="checkbox"/> D PERSISTENT	<input checked="" type="checkbox"/> H IGNITABLE	<input type="checkbox"/> L INCOMPATIBLE
		<input type="checkbox"/> M NOT APPLICABLE

EPA FORM 2070-12 (7-81)



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

GA D048711972

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: _____
(Acres)

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D048711972

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, standing liquids, leaking drums)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: Unknown

IV. COMMENTS

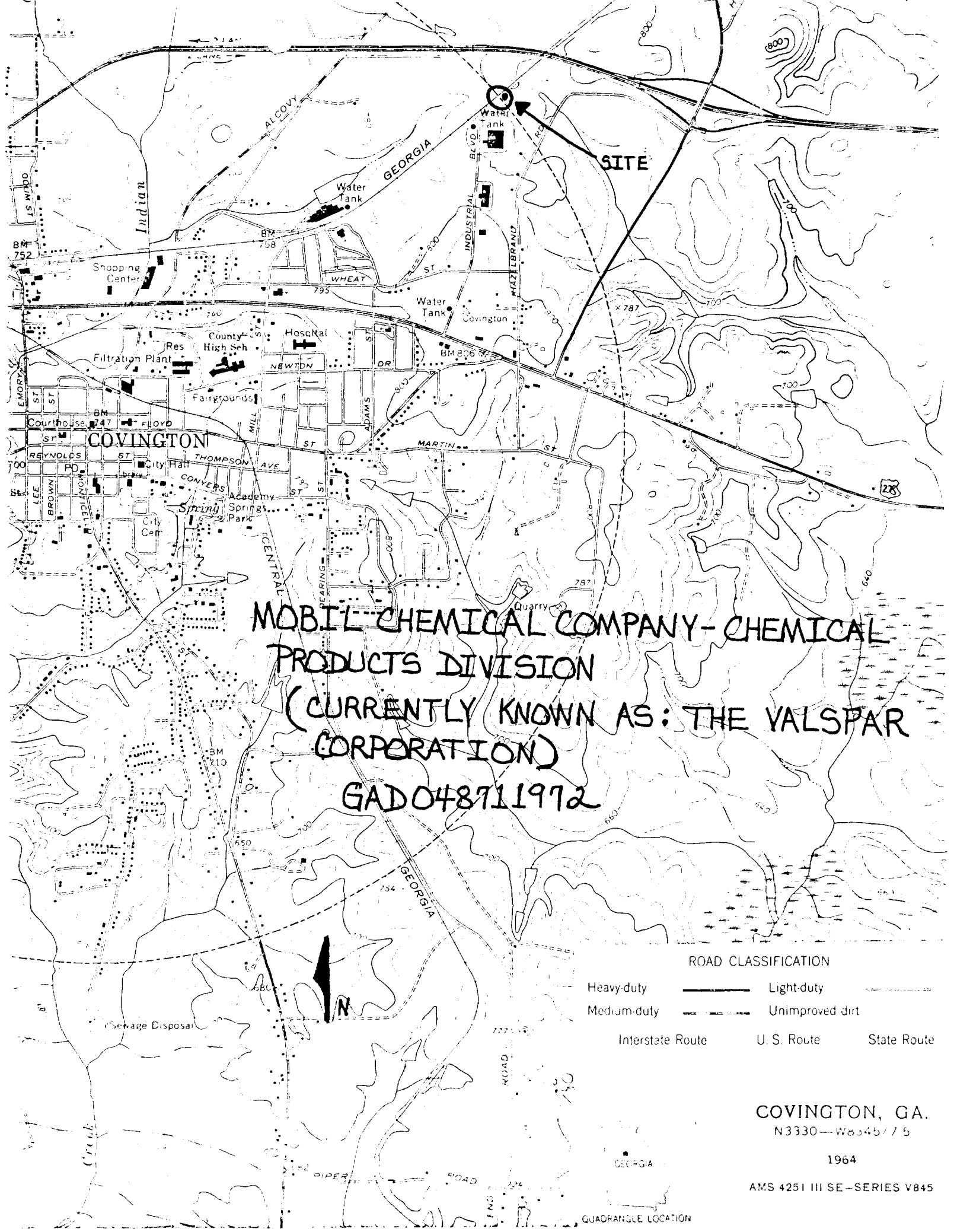
None

V. SOURCES OF INFORMATION (Cite specific references e.g., state free sample analysis reports)

GA EPD State Files
Mobil Chemical Company - Chemical Products Division (currently known as
The Valspar Corporation) Covington, Georgia.
Telephone Conversation Record 10/25/85.

POOR LEGIBILITY

**PORTIONS OF THIS DOCUMENT
MAY BE UNREADABLE, DUE TO
THE QUALITY OF THE
ORIGINAL**



MOBIL CHEMICAL COMPANY-CHEMICAL
PRODUCTS DIVISION
(CURRENTLY KNOWN AS: THE VALSPAR
CORPORATION)
GADO48711972

ROAD CLASSIFICATION

Heavy-duty	—————	Light-duty	-----
Medium-duty	- - - - -	Unimproved dirt
Interstate Route	—————	U. S. Route	-----
		State Route

COVINGTON, GA.
N3330—W8345/75

1964

AMS 4251 III SE-SERIES V845

QUADRANGLE LOCATION

Part A, Permit Process --- Internal Checklist

ID Number GAA ONE 711 972 Inst Name MOBIL CHEM CO CHEM CRATING

PHASE ONE

Refer to Form No:	Interim Regulatory Requirements	Indicate by your initials:		Valid Prm/g Date?
		Yes	No	
1	T/S/D Facility? (If No, return to respondent.)	OK	_____	
3	Form 1 received?	OK	_____	
1	Form 3 received?	OK	_____	
1 & 3	Postmarked on or before November 19, 1980?	OK	_____	
3	Date of operation entered?	OK	_____	
3	Date of operation on or before November 19, 1980?	OK	_____	
Notif. record	Notifier?	OK	_____	
	Notified on or before August 18, 1980?	OK	_____	
1	Form 1, XIII B signed?	OK	_____	
3	Form 3, IX B Signed?	OK	_____	

(If all ten items above are initialed in the Yes column, generate Interim Status Acknowledgement and indicate the trigger date here:

12/19/80

PHASE TWO

1	Unsure if regulated or non-regulated?	_____	_____
3	New facility?	_____	_____
1 & 3	Core items missing? If Yes, indicate which items: Facility name____; location____; mail address____; operator info____; certification____; process info____; waste info____; owner____; sigs____.		

PHASE THREE

1 & 3	Non-core items missing? If Yes, indicate which items: Maps____; photos____; drawings____; lat/long____. Other observations and comments:	
-------	--	--

Log out/Log in
on reverse side

RECEIVED EPA/MT DIV IV	004 12
Received Date & Stamp	

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION <i>Consolidated Permits Program</i> (Read the "General Instructions" before starting.)		I. EPA I.D. NUMBER F G A D 0 4 8 7 1 1 9 7 2	
LABEL ITEMS		PLEASE PLACE LABEL IN THIS SPACE		GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	
EPA I.D. NUMBER					
III. FACILITY NAME					
V. FACILITY MAILING ADDRESS					
VI. FACILITY LOCATION					

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column. If the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP MOBIL CHEMICAL CO CHEMICAL COATINGS DIV

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)	
2 BOLLINGER D G	PLANT MANAGER	4 0 4	7 8 7 0 0 3 1

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX		B. CITY OR TOWN		C. STATE	D. ZIP CODE
3 P O BOX 71		4 COVINGTON	GA	3 0 2 0 9	

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER		B. COUNTY NAME		C. CITY OR TOWN		D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
5 9172 INDUSTRIAL DRIVE		NEWTON		COVINGTON	GA	3 0 2 0 9		

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	2	8	5	1	(specify)	Paints, Varnishes, Lacquers, Enamels and allied products.	(specify)
C. THIRD				D. FOURTH			
7					(specify)		(specify)

VIII. OPERATOR INFORMATION

A. NAME										B. Is the name listed in Item VIII-A also the owner?																				
8	M	O	B	I	L	C	H	E	M	I	C	A	L	C	O	D	I	V	M	O	B	I	L	O	I	L	C	O	R	P
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)										D. PHONE (area code & no.)																				
F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P = PRIVATE										4 0 4 7 8 7 0 0 3 1																				
E. STREET OR P.O. BOX																														
9 1 7 2 INDUSTRIAL DRIVE																														
F. CITY OR TOWN										G. STATE																				
C O V I N G T O N										G A																				
H. ZIP CODE										IX. INDIAN LAND																				
3 0 2 0 9										Is the facility located on Indian lands?																				
										<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO																				

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
9 N										9 P									
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
9 U										G A 0 0 2 6 7 5 1									
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
9 R										3 0 7 9 1 0 7 4 2 3 6 0									
										(specify)									
										NPDES Short Form "C" Application									
										(specify)									
										GA. Dept. of NAT. RESOURCES									

XI. MAP

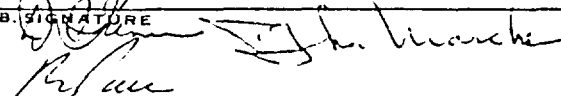
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Manufacture of clear lacquer coatings for the food and beverage industries.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
P. J. LaMarche, V.P. Mobil Chemical Co. & Gen. Mgr. Chemical Coatings Division				November 18, 1980	

COMMENTS FOR OFFICIAL USE ONLY

--	--	--	--	--	--	--	--	--	--

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (*mark one box only*) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

☐ 2. NEW FACILITY (Complete item below.)

B. REVISED APPLICATION (place an "X" below and complete Item I above)

III. PROCESSES – CODES AND DESIGN CAPACITIES

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

- | PROCESS | PROCESS CODE | APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY | PROCESS | PROCESS CODE | APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY |
|--------------------------------|----------------------|--|---|-----------------|--|
| Storage: | | | Treatment: | | |
| CONTAINER (barrel, drum, etc.) | S01 | GALLONS OR LITERS | TANK | T01 | GALLONS PER DAY OR LITERS PER DAY |
| TANK | S02 | GALLONS OR LITERS | SURFACE IMPOUNDMENT | T02 | GALLONS PER DAY OR LITERS PER DAY |
| WASTE PILE | S03 | CUBIC YARDS OR CUBIC METERS | | T03 | TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR |
| SURFACE IMPOUNDMENT | S04 | GALLONS OR LITERS | INCINERATOR | T04 | GALLONS PER DAY OR LITERS PER DAY |
| Disposal: | | | OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.) | | |
| INJECTION WELL | D79 | GALLONS OR LITERS | | | |
| LANDFILL | D80 | ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER | | | |
| LAND APPLICATION | D81 | ACRES OR HECTARES | | | |
| OCEAN DISPOSAL | D82 | GALLONS PER DAY OR LITERS PER DAY | | | |
| SURFACE IMPOUNDMENT | D83 | GALLONS OR LITERS | | | |
| UNIT OF MEASURE | UNIT OF MEASURE CODE | UNIT OF MEASURE | UNIT OF MEASURE CODE | UNIT OF MEASURE | UNIT OF MEASURE CODE |
| GALLONS | G | LITERS PER DAY | V | ACRE-FEET | A |
| LITERS | L | TONS PER HOUR | D | HECTARE-METER | F |
| CUBIC YARDS | Y | METRIC TONS PER HOUR | W | ACRES | B |
| CUBIC METERS | C | GALLONS PER HOUR | E | HECTARES | Q |
| GALLONS PER DAY | U | LITERS PER HOUR | H | | |

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER		A. PROCESS CODE <i>(from list above)</i>	B. PROCESS DESIGN CAPACITY						FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE <i>(from list above)</i>	B. PROCESS DESIGN CAPACITY						FOR OFFICIAL USE ONLY
			1. AMOUNT <i>(specify)</i>				2. UNIT OF MEASURE <i>(enter code)</i>						1. AMOUNT <i>(specify)</i>				2. UNIT OF MEASURE <i>(enter code)</i>	
			18	-	19	20	21	22				18	-	19	20	21	22	
X-1	S	O 2	600				G			5								
X-2	T	O 3	20				E			6								
1	S	O 1	7,000				G			7								
2	T	O 4	6,000				G			8								
3										9								
4										10								

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (CONT. FROM 104). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

T04 - Spill Containment Tank. Below grade 6,000 gallon Fiberglass Tank. Installed as part of Spill Prevention Control and Countermeasure Plan (SPCC).

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER - Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE - For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS P
TONS T

METRIC UNIT OF MEASURE CODE
KILOGRAMS K
METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA ID NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY									
W G A D 0 4 8 7 1 1 9 7 2 1													W DUP 2 DUP									
DESCRIPTION OF HAZARDOUS WASTES (continued)																						
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES															
							1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))							
1	K	0	7	8	60,000	P	S	0	1													
2	D	0	0	1	6,000	P	S	0	1													
3	K	0	8	1	0	P	T	0	4												None to date	
4																						
5																						
6																						
7																						
8																						
9																						
10																						
11																						
12																						
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22																						
23																						
24																						
25																						
26																						

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) OF PAGE 3.

EPA I.D. NO. (enter from page 1)

9	8	7	6	5	4	3	2	1	0	T/A	C
F	G	A	D	0	4	8	7	1	1	9	7
1	2	3	4	5	6	7	8	9	0	1	2

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

3	3	3	6	5	0	N
65	66	67	68	69	70	71

LONGITUDE (degrees, minutes, & seconds)

8	3	5	0	2	1	W
72	73	74	75	76	77	78

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

C	E	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99
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3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

C	F	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99
---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

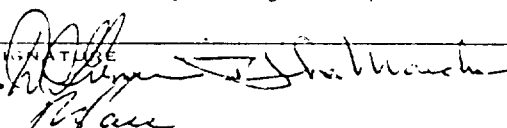
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

P. J. LaMarche, V.P. Mobil Chemical Co.
& Gen. Mgr. Chemical Coatings Division

B. SIGNATURE



C. DATE SIGNED

November 18, 1980

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

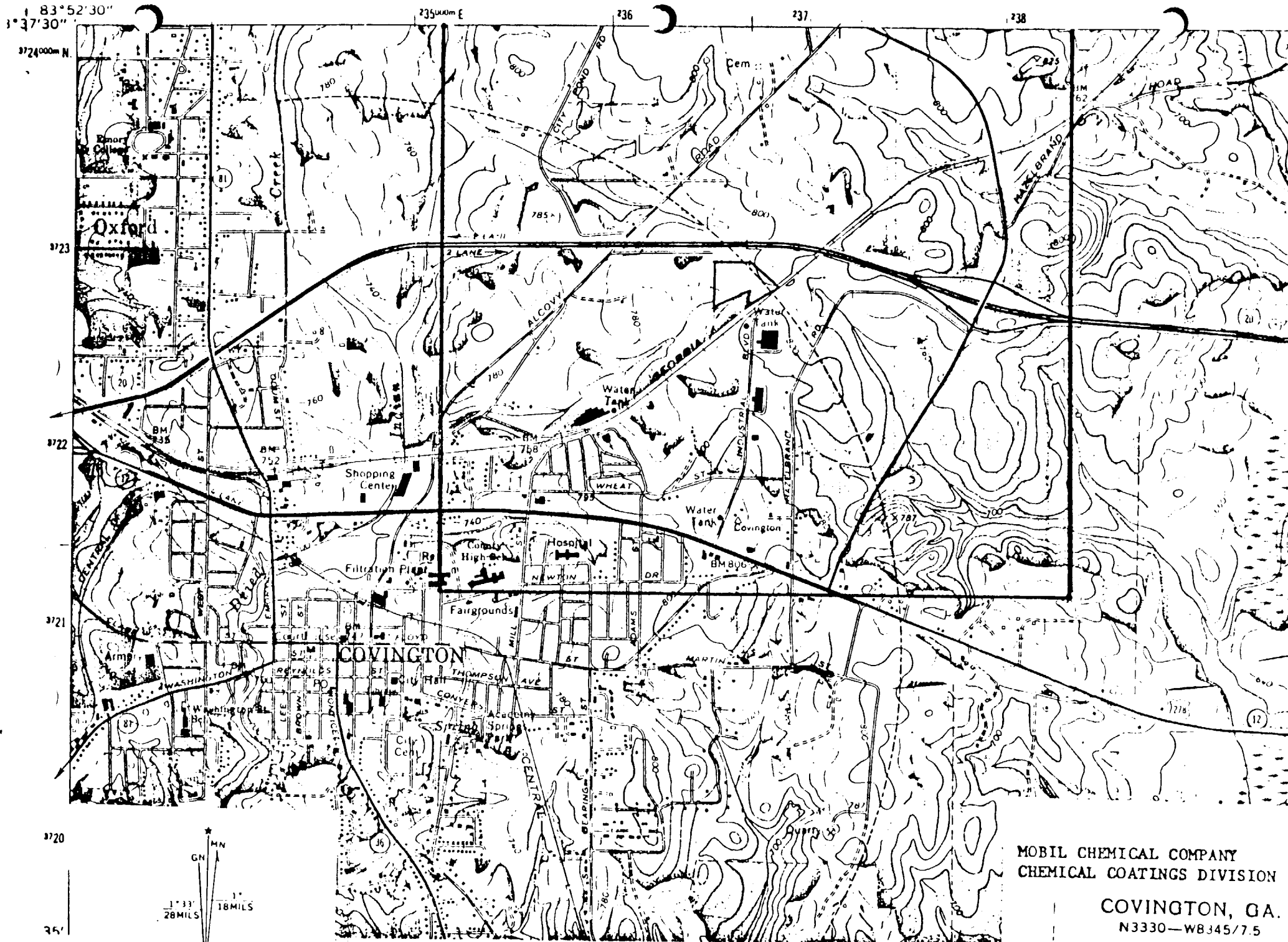
A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

POOR LEGIBILITY

**PORTIONS OF THIS DOCUMENT
MAY BE UNREADABLE, DUE TO
THE QUALITY OF THE
ORIGINAL**



MOBIL CHEMICAL COMPANY
CHEMICAL COATINGS DIVISION

COVINGTON, GA.
N3330-WB345/7.5

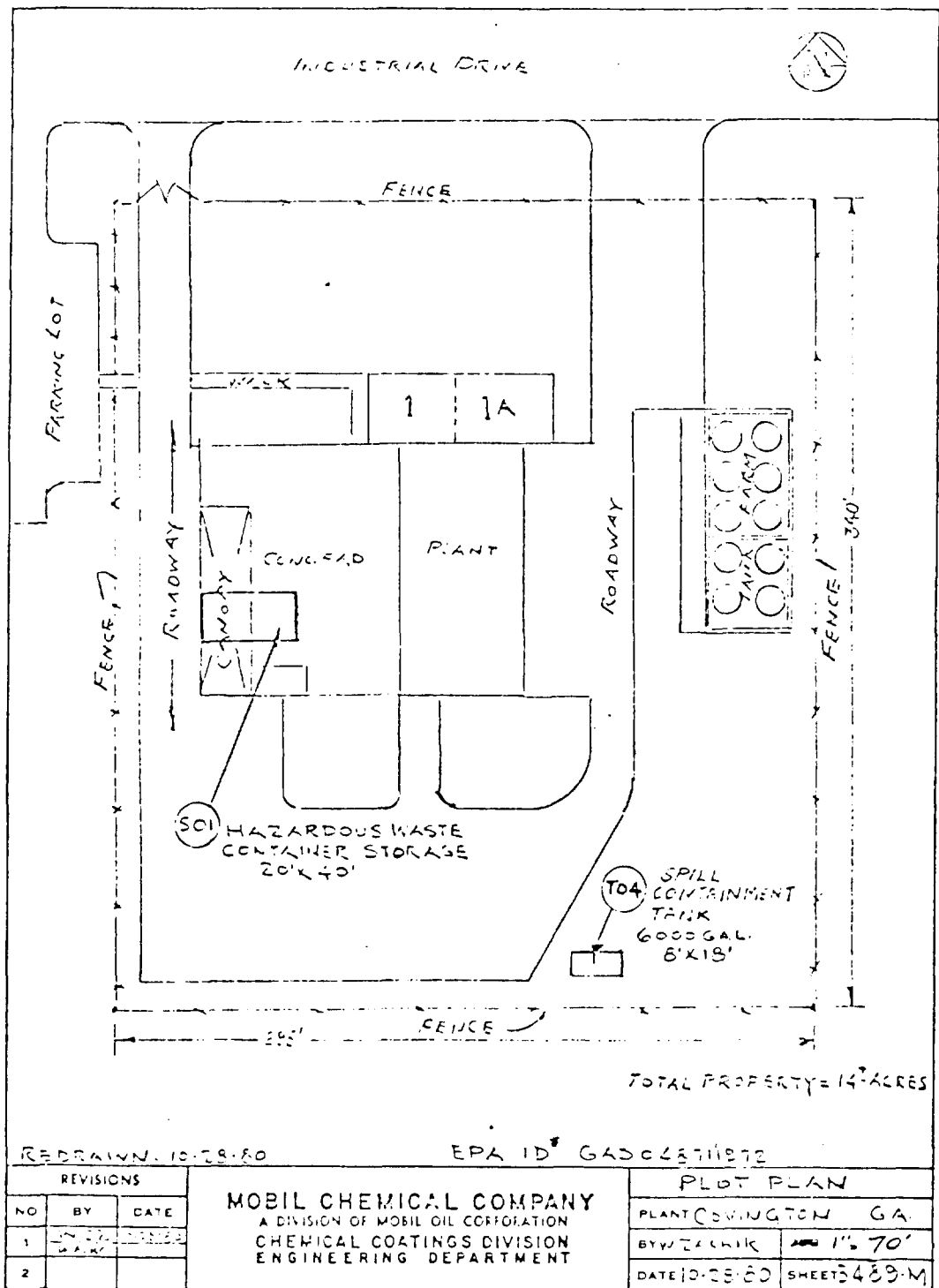
1964

UTM GRID AND 1964 MAGNETIC NORTH

SEE PLOT PLAN FOR DETAILS EPA ID# GAD048711972

AMS 4251 III SE-SERIES V.4.1

FACILITY DRAWING (see page 4)





JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

May 12, 1977

TRIP REPORT

Site Name and Location: Mobil Chemical Company
9172 Industrial Drive
Covington Newton County

Trip by: Robert W. Sackellares *RWS*
Environmental Engineer
Industrial & Hazardous Waste
Control Unit

Accompanied by: None

Date of Trip: May 9, 1977

Officials Contacted: Plastics Division, Packaging Dept.
Mr. Paul Lang, Plant Engineer
(404) 786-5372

Plastics Division, Foam Products Plant
Mr. Stuart McCanless, Plant Engineer
(404) 786-5372

Chemical Resins and Coatings Division
Mr. Gerald Autry, Production Coordinator
(404) 787-0031

Reference: Memo, "Disposal of Waste from Mobil Chemical
at the Catoosa County Disposal Site, Highway
151" dated May 3, 1977.

Comments:

Mobil Chemical Company has three (3) plants on this site.

Plastics Division, Packaging Department.

This plant generates trash, polyethylene dust from air cleaning filter bags, waste lubricating oil, and solvents contaminated with ink pigments. The dust is contaminated with a waxy material which is very sticky, therefore, it tends to coagulate and adhere to surfaces. The dust and trash are placed in 3200 ft.³ compactor and disposed of at the County Sanitary Landfill. The lubricating oil is stored until it is picked up by a waste oil hauler. The solvents are mostly n-propyl and isopropyl alcohol. Some of the ink pigments contain Pb CrO₄. Mr. Lang agreed to send this Unit a letter outlining the volumes and composition of the waste being generated.

Plastics Division, Foam Products Plant

This plant generates waste lubricating oil, trash, and a minimal amount of solvents contaminated with ink pigments. Virtually all the polystyrene is recycled in house. The trash is compacted and taken to the County Sanitary Landfill. The waste solvents and oil are stored together until they are picked up by a waste oil hauler.

Chemical Resins and Coatings Division

This plant generates a waste stream of empty drums and contaminated solvents. The solvents are sent to Pittsburgh for recycling. The drums are sent to the County Sanitary Landfill.

Conclusions:

The Plastics Division Packaging Department Plant needs an adequate means of disposing of its contaminated solvents.

Recommendations and Follow-up Required:

1. Request more specific waste generation from Plastics Packaging Plant.
2. Require Plastics Packaging Plant to submit plan for disposing of its hazardous wastes.

Reviewed by:

Photographs: None

Attachments: None

cc: Bob Bishop (North Georgia Region)



JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

File Copy
Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S W
ATLANTA, GEORGIA 30334

May 21, 1976

Mr. J. Pitra
Mobil Chemical Co.
1024 South Avenue
Plainsfield, New Jersey 07062

Dear Mr. Pitra:

Reference your telephone request of May 19, 1976, in regard to our requirements for the land disposal of paint wastes in Georgia, please find attached the following: Rules and Regulations for Solid Waste Management, Guidelines for the Management of Hazardous Solid Wastes, and Guidelines for the Sanitary Landfill Disposal of Liquid, Semi-Solid, and Industrial Sludge Wastes. We understand that your paint wastes will be generated in spray booths where metal parts are painted.

Sincerely,

Clyde F. Fehn, Unit Coordinator
Industrial & Hazardous Waste Control
Unit
Industrial Solid Waste Control and
Resource Recovery Program

CFF:dc

cc: Moses N. McCall
John D. Taylor, Jr.



JOE D. TANNER
Commissioner

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION

270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

J. LEONARD LEDBETTER
Division Director

May 23, 1977

M E M O R A N D U M

TO: Howard L. Barefoot, Unit Coordinator *HLS*
Industrial & Hazardous Waste Control Unit

FROM: Robert W. Sackellares, Environmental Engineer *RWS*
Industrial & Hazardous Waste Control Unit

SUBJECT: Recycling Of Waste Solvents Generated At Mobil Chemical, Covington

I talked to Mr. Paravecchio of Arivec Chemical Company today. He stated that they would be going to Mobil Chemical Company next week to pick up their waste solvents.

RWS:ejt

cc: George Elder; Attn: Bill Martello

cc: D. Downing

Mobil Chemical Company

CHEMICAL COATINGS DIVISION

P.O. BOX M-1

SHORT HILLS, NEW JERSEY 07078

TELEPHONE (201) 467-8500

August 24, 1982

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Department of Natural Resources
Environmental Protection Division
Industrial and Hazardous Waste Management Program
270 Washington Street, S.W. - Room 824
Atlanta, GA 30334

Attention: Mr. John Taylor

EPA ID No. GAD 048711972

Dear Mr. Taylor:

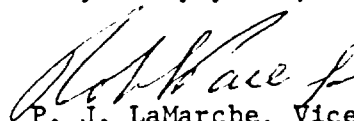
The Mobil Chemical Company, as a precautionary measure, submitted RCRA PART "A" HAZARDOUS WASTE permit application to obtain interim status as a hazardous waste storage facility on November 18, 1980 to EPA Region IV, for the Mobil Chemical Plant, 9172 Industrial Drive, Covington, Georgia 30208.

On the basis of our actual operating experience, we find that the ninety (90) day storage limitation is adequate under normal conditions. Therefore, we wish to withdraw our RCRA PART "A" HAZARDOUS WASTE permit application, thereby eliminating the MOBIL CHEMICAL COMPANY PLANT, Covington, GA 30208 as a hazardous waste storage facility.

The notification of hazardous waste activity submitted for the plant should be amended to reflect the activity of being only a generator of hazardous waste.

If you have any questions, please write or call Dominic Grenci at Mobil Chemical Company, P. O. Box M-1, Short Hills, N. J. 07078 or (201)-467-8500, Ext. 333.

Very truly yours,



P. J. LaMarche, Vice President
Mobil Chemical Company &
General Manager, Chemical Coatings Div.

8/24/82

DAG:esu

Rec by
Betty P. Kendall
9-3-82

Mobil Chemical Company

CHEMICAL COATINGS DIVISION

P.O. BOX M-1

SHORT HILLS, NEW JERSEY 07078

TELEPHONE (201) 467-8500

file coatings

ADVISORY BOARD
NOTES TO THE BOARD

2861 1982

August 24, 1982

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

RECEIVED

Department of Natural Resources
Environmental Protection Division
Industrial and Hazardous Waste Management Program
270 Washington Street, S.W. - Room 824
Atlanta, GA 30334

Attention: Mr. John Taylor

EPA ID No. GAD 048711972

Dear Mr. Taylor:

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The notification of hazardous waste activity submitted for the plant should be amended to reflect the activity of being only a generator of hazardous waste.

If you have any questions, please write or call Dominic Greci at Mobil Chemical Company, P. O. Box M-1, Short Hills, N. J. 07078 or (201)-467-8500, Ext. 333.

Very truly yours,

P. J. LaMarche

P. J. LaMarche, Vice President
Mobil Chemical Company &
General Manager, Chemical Coatings Div.

[Signature]
1420

DAG:esu

8/24/82

Mobil Chemical Company

CHEMICAL COATINGS DIVISION

P.O. BOX M-1
SHORT HILLS, NEW JERSEY 07078
TELEPHONE (201) 467 8500

October 28, 1982

RECEIVED

NOV 1 1982

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

Department of Natural Resources
Environmental Protection Division, Solid Waste
Management Section
270 Washington Street, S.W., Room 822
Atlanta, GA 30334

Re: Hazardous Waste Regulations

Gentlemen:

The Chemical Coatings Division of Mobil Chemical Co. has eleven plants located throughout the United States. We dispose of hazardous wastes in facilities located in many states and transport this waste through several other states. In order for us to be certain that we are complying with the regulations in your state, I would appreciate your supplying me with the information listed on the attached sheet. You may note your response on the extra sheet and return to me if you wish.

Very truly yours,

MOBIL CHEMICAL COMPANY


Bruce C. McCreary
Environmental Engineer

BCM:de

Attachment

Environmental Engineer
Mobil Chemical Company
P. O. Box M-1
Short Hills, New Jersey 07

1. Do you require a special state license or permit for trucking companies to haul hazardous waste within your state?
2. Do you publish a list of state approved transportation companies? If yes, please send me a copy.
3. Do you require prior notification and/or approval of plans to transport waste within or through your state?
4. Do you require prior notification and/or approval permits covering plans to treat or dispose of waste at an approved facility within your state?
5. Do you require that a special waste stream identification permit or number be obtained for any hazardous waste to be treated or disposed of within your state?
6. Do you currently require or do you plan to require a separate hazardous waste generator or storage permit application similar to the Federal EPA Part B?
7. Do you require any of the following hazardous waste activity reports other than those required by the Federal EPA?

Monthly
Quarterly
Annually
8. If any reports are required, please send me a copy of the form and regulations.

ENVIRONMENTAL PROTECTION DIVISION
INDUSTRIAL AND HAZARDOUS WASTE MANAGEMENT PROGRAM

ACTION REPORT

Yellow
Red
Green

REVIEWED BY:	<i>[Signature]</i>	SEQUENCE NUMBER IS:	00864
LP FILE ENTRY:	Yes	RECORDED BY:	BPK 5-11-82

FACILITY NAME	MOBIL CHEMICAL CO CHEMICAL COATING	SIC CODE:	3079
LOCATION STREET:	9172 INDUSTRIAL DR	PHONE NUMBER:	
CITY:	COVINGTON	ZIP:	30209
		COUNTY:	NEWTON
FACILITY ID NO:	GAD048711972	PERMIT NUMBER OR STATUS:	
ACTIVITY CODE:	A02	MAJOR (M) OR N-MAJOR(N):	N
		COMPLIANCE OFFICER:	MUNDY

ACTION BY:	Bill Mundy	ACCOMPANIED BY:	
PERSON(S) CONTACTED:		TITLE(S):	

DATE OF ACTION:	820409	FOLLOW UP DATE:	830930
PROGRAM ACTIVITY:	03 Permit Issuance	FIELD HOURS:	TOTAL HOURS: 01
ACTION TAKEN:	45 Evaluate Application for On Site Storage Permit		
FINDING/DECISION:	95 Additional Info Required		
NEXT ACTION:	12 Conduct ISS Inspection		

COMMENTS, CONCLUSIONS, AND RECOMMENDATIONS

COMMENTS:

ENVIRONMENTAL PROTECTION DIVISION
INDUSTRIAL AND HAZARDOUS WASTE MANAGEMENT PROGRAM

ACTION REPORT

Yellow
Red
Green

REVIEWED BY:	<i>gmk</i>	SEQUENCE NUMBER IS:	00864
LP FILE ENTRY:	Yes	RECORDED BY:	BPK 5-11-82

FACILITY NAME	MOBIL CHEMICAL CO CHEMICAL COATING	SIC CODE:	3079
LOCATION STREET:	9172 INDUSTRIAL DR	PHONE NUMBER:	
CITY:	COVINGTON	ZIP:	30209
		COUNTY:	NEWTON
FACILITY ID NO:	GAD048711972	PERMIT NUMBER OR STATUS:	
ACTIVITY CODE:	A02	MAJOR (M) OR N-MAJOR(N):	N
		COMPLIANCE OFFICER:	<i>W</i> MUNDY

ACTION BY:	Bill Mundy	ACCOMPANIED BY:	
PERSON(S) CONTACTED:		TITLE(S):	

DATE OF ACTION:	820409	FOLLOW UP DATE:	830930
PROGRAM ACTIVITY:	03 Permit Issuance	FIELD HOURS:	TOTAL HOURS: 01
ACTION TAKEN:	44 Evaluate Application for On Site Storage Permit		
FINDING/DECISION:	95 Additional Info Required		
NEXT ACTION:	12 Conduct ISS Inspection		

COMMENTS, CONCLUSIONS, AND RECOMMENDATIONS

COMMENTS:



JOE D. TANNER
Commissioner

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION

270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

J. LEONARD LEDBETTER
Division Director

December 28, 1982

Mr. Bruce C. McCreary
Environmental Engineer
Mobil Chemical Company
Chemical Coatings Division
P.O. Box M-1
Short Hills, NJ 07078

Dear Mr. McCreary:

Reference your letter to this office dated October 28, 1982. Please find enclosed a copy of the information you requested.

A transporter must have an EPA identification number in order to transport hazardous waste in Georgia. The Georgia Environmental Protection Division has no permit requirements for transporting hazardous waste in this state, but requires compliance with the manifest process. However, the transportation of certain hazardous materials, PCB's, radioactives materials, liquified natural gas, must be permitted under the Georgia Hazardous Materials Act. Please contact the following office for more information:

Georgia Department of Transportation
Office of Permits and Enforcement
940 Virginia Avenue
Hapeville, GA 30354
Telephone: 404/656-5428

Sincerely,

A handwritten signature in cursive script, reading "I. Renee Hudson".

I. Renee Hudson
Environmental Specialist
Industrial & Hazardous Waste
Management Program

IRH:bpk:2002C

Enclosure

cc: Mobil Chemical Co.-Covington (R)

Environmental Engineer
Mobil Chemical Company
P. O. Box M-1
Short Hills, New Jersey 07

1. Do you require a special state license or permit for trucking companies to haul hazardous waste within your state? The Georgia Environmental Protection Division has no permit requirements for transporting hazardous waste in this state but requires the transporter to obtain an EPA identification number and to comply with the manifest process. The transportation of certain hazardous materials, PCB's, radioactive materials and liquified natural gas, must be permitted by the Georgia Department of Transportation.
2. Do you publish a list of state approved transportation companies? If yes, please send me a copy.

No.

3. Do you require prior notification and/or approval of plans to transport waste within or through your state?

No.

4. Do you require prior notification and/or approval permits covering plans to treat or dispose of waste at an approved facility within your state?
Yes, a hazardous waste treatment, storage or disposal facility must obtain an EPA Identification number and apply for a hazardous waste treatment, storage or disposal permit.

5. Do you require that a special waste stream identification permit or number be obtained for any hazardous waste to be treated or disposed of within your state?
Yes, a hazardous waste treatment, storage or disposal facility must obtain an EPA Identification number and apply for a hazardous waste treatment, storage or disposal permit.

6. Do you currently require or do you plan to require a separate hazardous waste generator or storage permit application similar to the Federal EPA Part B?

This office only permits facilities that treat, store or dispose of hazardous waste. These facilities will submit Part B applications similar to the Federal EPA Part B.

7. Do you require any of the following hazardous waste activity reports other than those required by the Federal EPA?

Monthly No, this office is requiring all hazardous waste generators and owners
Quarterly and operators of hazardous waste treatment, storage and disposal facilities and generators to submit annual reports to this office in March
Annually of 1983.

8. If any reports are required, please send me a copy of the form and regulations.
Forms will be available sometime during the month of January, 1983.

POOR LEGIBILITY

**PORTIONS OF THIS DOCUMENT
MAY BE UNREADABLE, DUE TO
THE QUALITY OF THE
ORIGINAL**

ENVIRONMENTAL PROTECTION AGENCY

GENERATOR ANNUAL HAZARDOUS WASTE REPORT

This report is for the calendar year ending December 31, 1982

AFFIX LABEL HERE

GENERAL INSTRUCTIONS: If you received a preprinted label attached to the mailing envelope in which this form was enclosed, insert it in the space provided. If any of the information on the label is incorrect, draw a line through it and provide the correct information in the appropriate section below. If the information is correct and complete, leave sections I, II, and III blank. If you did not receive a preprinted label, complete all sections. REFER TO THE SPECIFIC INSTRUCTIONS PRINTED ON THIS BOOKLET BEFORE COMPLETING THIS FORM. Information requested in this report is required by law (Section 3002 of the Resource Conservation Recovery Act).

I. GENERATOR'S EPA I.D. NUMBER

T/A C

G A D 0 4 8 7 1 1 9 7 2

II. NAME OF INSTALLATION

M O B I L I C H E M I C A L C O I C H E M I C A L C O I A T I N G S I N T Y

III. INSTALLATION MAILING ADDRESS

P O B O X 1 7 1

Street or P.O. Box

C O V I N G T O N G I A 3 0 2 0 9

City or Town

State Zip Code

IV. LOCATION OF INSTALLATION (if different than section III above)

9 1 7 2 I N D U S T R I A L D R I V E

Street or Route number

C O V I N G T O N G I A 3 0 2 0 9

City or Town

State Zip Code

V. INSTALLATION CONTACT

B O L L I N G E R D I G I P L A N T M A N A G E R

Name (last and first)

4 0 4 1 - 7 8 7 1 - 0 0 3 1 1

Phone No. (area code & no.)

SIC CODE 2 8 5 1

VI. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

D. G. Bollinger

Plant Manager

Signature of Authorized Representative

Date Signed

Print/Type Name

Title

ENVIRONMENTAL PROTECTION AGENCY

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1982

Date rec'd:

Rec'd by:

VII. GENERATOR'S EPA I.D. NO.

T/A C

5 G A D O 4 8 7 1 1 9 7 2

1 2 13 14 15

IX. FACILITY'S EPA I.D. NO.

E P A D O Q 4 1 3 1 1 7 1 2 1 3

16 28

VIII. FACILITY NAME (specify facility to which all wastes on this page were shipped)

Mobil Chemical Co.
Chemical Coatings Division

X. FACILITY ADDRESS

372 Cleveland St.
Rochester, Pa. 15074

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1982. This section to be completed only once. Do not repeat on supplemental sheets.)

Carolina Carriers; NCD 006996342

XII. WASTE IDENTIFICATION

Sequence #	Line #	A. Description of Waste	B. DOT Hazard code	C. EPA Hazardous Waste No. (see instructions)	D. Amount of Waste	E. Unit of Measure
1	1	Waste Solvent NO.O.S. NA 1993	0 8 35	D 0 0 1 38 39 42	4 9 3 2 0	P
2	2					
3	3					
4	4					
5	5					
6	6					
7	7					
8	8					
9	9					
10	10					
11	11					
12	12					

XIII. COMMENTS (enter information by section number—see instructions)

Mobil Chemical Company

PACKAGING COATINGS DEPARTMENT

P.O. BOX 71
COVINGTON, GEORGIA 30209
TELEPHONE (404) 787-0031

RECEIVED

Industrial & Hazardous Waste Management Program
Environmental Protection Division
270 Washington Street, S.W.
Atlanta, Georgia 30334

MAR 1 - 1983

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

Attn: Annual Reports

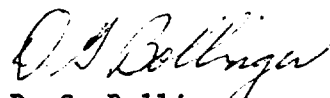
Dear Sirs:

Enclosed are the Hazardous Waste Generator Annual Reports for the Mobil Chemical Company, Chemical Coatings Division, Covington Plant for the years 1981 and 1982.

If any additional information is needed, please do not hesitate to contact me.

Yours truly,

MOBIL CHEMICAL COMPANY



D. G. Bollinger
Plant Manager

DGB:esu
ENCL.

Mobil Chemical Company

PACKAGING COATINGS DEPARTMENT

P.O. BOX 71
COVINGTON, GEORGIA 30209
TELEPHONE (404) 787-0031

May 10, 1983

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Department of Natural Resources
Environmental Protection Division
Industrial and Hazardous Waste Management Program
270 Washington Street, S.W. - Room 824
Atlanta, Georgia 30334

Attention: Ms. Gwendolyn Glass

EPA ID No. GAD 048711972

Dear Ms. Glass:

As per your phone request today, May 10, 1983, we are sending you a copy of a letter dated August 24, 1982.

Very truly yours,



D.G. Bollinger
Plant Manager
Mobil Chemical Company
Chemical Coatings Division

DGB/db
Enc.

RECEIVED
MAY 12 1983
ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH



JOE D. TANNER
Commissioner

File

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION

270 WASHINGTON STREET, S.W.

ATLANTA, GEORGIA 30334

J. LEONARD LEDBETTER
Division Director

June 2, 1983

Mr. Don Bollinger
Mobil Oil Corp.
Chemical Coating Div.
P.O. Box 71
Covington, GA 30209

RE: Request for Facility Status
Changes for Mobil Oil Corporation,
Chemical - Coatings, Covington,
GAD 048711972

Dear Mr. Bollinger:

This will acknowledge receipt of your request for withdrawal of your application for a Hazardous Waste Facility permit.

Based on the information provided, withdrawal of your application is warranted and your permit application has been placed in our inactive files. And your status has been changed to generator.

Please be advised that withdrawal of your permit application invalidates any variance that you received to continue existing hazardous waste treatment storage or disposal during the permit review process and that based on our concurrence with your withdrawal request, the Federal Environmental Protection Agency will terminate your facility's interim status.

Should you wish to treat, store, or dispose of hazardous waste in the future, it will be necessary that a hazardous waste handling permit be issued, prior to the construction of such facilities, under authority of Section 8 of the Georgia Hazardous Waste Management Act and paragraphs .10 and .11 of Georgia's Rules for Hazardous Waste Management, Chapter 391-3-11.

If further clarification is needed on this matter, please feel free to contact Ms. Gwendolyn Glass at 404/656-7802.

Sincerely,

A handwritten signature in dark ink, appearing to read "John D. Taylor, Jr.", written over a horizontal line.

John D. Taylor, Jr., Program Manager
Industrial & Hazardous Waste
Management Program

JDT:ggb:245
cc: James H. Scarbrough
Moses N. McCall, III

DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL PROTECTION DIVISION
WASTE MANAGEMENT DATA SHEET

RECEIVED
FEB 13 1984
MUNICIPAL SOLID WASTE

NAME AND LOCATION OF FACILITY

Mobil Chemical Company EPA ID # GAD 048 711 972
Chemical Products Division
9172 Industrial Drive
Covington, Georgia 30209

PERSON TO CONTACT

(ENTER THE NAME, ADDRESS, TITLE AND BUSINESS TELEPHONE NUMBER OF
THE PERSON TO CONTACT REGARDING INFORMATION SUBMITTED ON THIS FORM).

Dominic A. Greci, Manager, Environmental Affairs
Mobil Chemical Company
P. O. Box M-1
Short Hills, New Jersey 07078 (201) 467-8500 Ext. 333

DATES OF WASTE HANDLING

(ENTER THE YEARS THAT YOU ESTIMATE WASTE TREATMENT, STORAGE OR DISPOSAL
BEGAN AND ENDED AT THE SITE. IF YOU SELECTED A FACILITY OFF-SITE PLEASE
NOTE AND EXPLAIN IN "COMMENTS" SECTION.

No treatment, storage or disposal has taken place on this plant site.
Mobil Chemical Company obtained interim status as storage facility with
submittal of RCRA Part "A" Hazardous Waste Permit Application on 11/18/80.
Interim status terminated by Region IV EPA by letter dated 6/2/83 at
Mobil Chemical Company's request.

GENERAL TYPE OF WASTE

- | | |
|---------------------|------------------------------|
| 1- () ORGANICS | 7- () BASES |
| 2- () INORGANICS | 8- () PCB's |
| 3- (X) SOLVENTS | 9- () MIXED MUNICIPAL WASTE |
| 4- () PESTICIDES | 10- () UNKNOWN |
| 5- () HEAVY METALS | 11- () OTHER (SPECIFY) |
| 6- () ACIDS | |

WASTE QUANTITY (ESTIMATED)

Plant generates approximately 1100 gallons of solvent waste every
ninety (90) days or 4400 gallons per year.

HAS THERE EVER BEEN A SPILL OR DISCHARGE OF A HAZARDOUS SUBSTANCE FROM YOUR
FACILITY? (BRIEFLY EXPLAIN THE NATURE OF THE RELEASE).

None

COMMENTS

(IF THERE IS ANY COMMENTS THAT YOU BELIEVE WOULD CLARIFY THE PAST WASTE HANDLING PRACTICES OF YOUR FACILITY OR OF FACILITIES YOU SELECTED TO HANDLE YOUR WASTE, PLEASE ELABORATE IN THE SPACE PROVIDED).

August, 1973 (Plant startup) to January 1983 shipped to Mobil Chemical Company, Rochester, Pennsylvania for recycle/reuse.

1983 to present solvent waste sent to:

Oldover Corporation, Cascade, Virginia and Stauffer Chemical Company, Mt. Pleasant, Tennessee for use as a fuel.

SIGNATURE AND TITLE Dominic A. Greci (201) 467-8500 Ext. 333

NAME

TELEPHONE

150 J.F.K. Parkway
STREET

Short Hills, New Jersey 07078

CITY

STATE

ZIP CODE


SIGNATURE

1/31/84
DATE

Georgia Environmental Protection Division
GEORGIA ANNUAL HAZARDOUS WASTE REPORT
Reporting Period January 1 thru December 31, 1983
FORM A
IDENTIFICATION

Please print/type with Elite type (12 characters per inch)

I. EPA I.D. NUMBER

G A D 0 4 8 7 1 1 9 7 2

(seq. no. 00723)

II. NAME OF INSTALLATION

M O B I L C H E M I C A L C O M P A N Y

2851

III. INSTALLATION MAILING ADDRESS

P . O . B O X 7 1

Street or P.O. Box

C O V I N G T O N

City or Town

G E O R G I A

State

3 0 2 0 9

Zip Code

IV. LOCATION OF INSTALLATION (if different than Section III. above)

9 1 7 2 I N D U S T R I A L D R I V E

Street or Route Number

N E W T O N

County

State

Zip Code

V. INSTALLATION CONTACT

B O L L I N G E R , D O N A L D G P L A N T M G R .

Name (last and first)

4 0 4 - 7 8 7 - 0 0 3 1

Phone No. (Area code & number)

VI. PROCESS IN USE (Check as appropriate)

WE HAVE THEM AS AN AQS.

SQG	GEN	TRN	T01	T02	T03	T04	S01	S02	S03	S04	D80	D81	D83
	X						X						

X PRIVATE (Handle only self generated waste)

COMMERCIAL (Handle waste generated from other sources)

VII. CERTIFICATION - I certify under penalty of Law that I have personally examined and am familiar with the information submitted in this and all attached documents, and the based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

D. G. Bollinger, Plant Manager

Print/Type Name & Title

D. G. Bollinger

Signature of

Authorized Representative

2-22-84

Date Signed

Name of Installation: MOBIL CHEMICAL COMPANY
 EPA I.D. Number: GAD048711972

Form B

SELF-GENERATED HAZARDOUS WASTE AND ITS DISPOSITION

1. EPA HAZARDOUS WASTE NUMBER	D 10 10 11 F 10 10 15					TOTAL
2. On Hand, Un-site on January 1, 1983	4.51					4.51
3. Generated during 1983	19.798 24.308					19.798 24.308
4. TOTAL AMOUNT FOR WHICH TO ACCOUNT	28.818 24.308 ✓					28.818 24.308 ✓
5. Shipped to State of Pennsylvania	4.51					4.51
6. Shipped to State of Tennessee	5.338					5.338
7. Shipped to State of Virginia	13.867					13.867
8. Shipped to State of						
9. Shipped to Georgia Facility for Use, Reuse, Recycle or Reclaim						
10. Shipped to Georgia Facility for Treatment, Storage, or Disposal						
11. Treated Un-site						
12. Treatment Code						
13. Disposed of Un-site						
14. Disposal Code						
15. On Hand, Un-site on December 31, 1983	0.593					0.593
16. Storage Code	S01					
17. Other (Explain)						
18. TOTAL AMOUNT OF DISPOSITION	24.308 ✓					24.308 ✓

6/1/84 Bollinger is sending written addendum to D. ... to 19.798 mm

Mobil Chemical Company

PACKAGING COATINGS DEPARTMENT

P.O. BOX 71
COVINGTON, GEORGIA 30209
TELEPHONE (404) 787-0031

Industrial & Hazardous Waste Management Program
Environmental Protection Division
Room 724
270 Washington Street, S.W.
Atlanta, Georgia 30334

ATTENTION: ANNUAL REPORTS

FEB 27 1984
ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

Dear Sirs:

Enclosed is the Hazardous Waste Generator Annual Report for the Mobil Chemical Company, Chemical Products Division, Covington Plant for the year of 1983.

If any additional information is needed, please do not hesitate to contact me.

Yours truly,

MOBIL CHEMICAL COMPANY

D. G. Bollinger
2-22-84

D. G. Bollinger
Plant Manager

DGB/jmh
enclosures

Mobil Chemical Company

CERTIFIED MAIL - RETURN RECEIPT REQUESTED
P 475 424 683

CHEMICAL PRODUCTS DIVISION

P.O. BOX 1111

SHORT HILLS, NEW JERSEY 07078

TELEPHONE (201) 467-8500

June 1, 1984

[Handwritten signature]
JUN 1 1984

Mr. Jack Dempsey
Industrial and Hazardous Waste Management Program
Environmental Protection Division
Room 724
270 Washington Street, S.W.
Atlanta, Georgia 30334

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

RE: CORRECTED 1983 HAZARDOUS WASTE DISPOSAL REPORT
MOBIL CHEMICAL COMPANY
COVINGTON PLANT

Dear Mr. Dempsey:

Per your telephone conversation of June 1, 1984 with Mr. D. G. Bollinger, Plant Manager of our Covington facility, I have attached a corrected copy of the reference report.

I apologize for the inconvenience. If any additional information is needed, please do not hesitate to contact me at (201) 467-8500, ext. 337.

Yours truly,

MOBIL CHEMICAL COMPANY

[Handwritten signature: Janet M. Hartman]

Janet M. Hartman
Administrative Assistant
Environmental Engineering

attachment

cc: Mr. D. G. Bollinger, Plant Manager, Covington
Mr. D. A. Greci, Manager, Environmental Affairs

Name of Installation: MOBIL CHEMICAL COMPANY
 EPA I.D. Number: G A D 0 4 8 7 1 1 9 7 2

Form B

SELF-GENERATED HAZARDOUS WASTE AND ITS DISPOSITION

1. EPA HAZARDOUS WASTE NUMBER	D 1 0 0 1 F 0 0 5					TOTAL
2. Un Hand, Un-site on January 1, 1983	4.51					4.51
3. Generated during 1983	19.798					19.798
4. TOTAL AMOUNT FOR WHICH TO ACCOUNT	24.308					24.308
5. Shipped to State of Pennsylvania	4.51					4.51
6. Shipped to State of Tennessee	5.338					5.338
7. Shipped to State of Virginia	13.867					13.867
8. Shipped to State of						
9. Shipped to Georgia Facility for Use, Reuse, Recycle or Reclaim						
10. Shipped to Georgia Facility for Treatment, Storage, or Disposal						
11. Treated Un-site						
12. Treatment Code						
13. Disposed of Un-site						
14. Disposal Code						
15. Un Hand, Un-site on December 31, 1983	0.593					0.593
16. Storage Code	S01					
17. Other (Explain)						
18. TOTAL AMOUNT OF DISPOSITION	24.308					24.308

Mobil Chemical Company

CHEMICAL PRODUCTS DIVISION

P.O. BOX 11

SHORT HILLS, NEW JERSEY 07078

TELEPHONE (201) 467-8500

July 20, 1984

CERTIFIED MAIL P475 424 631
RETURN RECEIPT REQUESTED

ENVIRONMENTAL PROTECTION AGENCY
REGION IV
345 Courtland St., N.E.
Atlanta, GA 30365

Attention: Ms. Nell Keever

Re: MOBIL CHEMICAL COMPANY
CHEMICAL PRODUCTS DIVISION
COVINGTON, GEORGIA PLANT
EPA ID #GAD 048711972
NOTIFICATION of OWNERSHIP of CHANGE

Dear Ms. Keever:

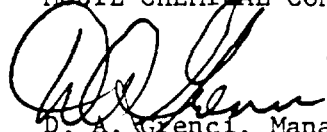
Effective July 31, 1984, ownership of the Mobil Chemical Company, Chemical Products Division Plant located at 9172 Industrial Drive, Covington, GA 30209 will be transferred to:

The Valspar Corporation
1101 Third Street South
Minneapolis, MN 55415
(612)-332-7371

EPA ID #GAD 048711972 should now be transferred to the Valspar Corporation. All future communications regarding this plant are to be sent to the new owners.

Very truly yours,

MOBIL CHEMICAL COMPANY


D. A. Grenci, Manager
Environmental Affairs

.DAG:esu

cc: Herbert F. Denker, Secretary
Valspar Corporation
1101 Third Street South
Minneapolis, MN 55415

cc: Mr. Tim Cash
Dept. of Natural Resources
Environmental Protection Division
270 Washington, S.W. Room 723
Atlanta, GA 30334

bcc: D.G. Boutte - NYC
P.B. Raue - NYC
D.G. Bollinger - Covington
M.J. Smallhooover - Pittsburgh

Mobil Chemical Company

CHEMICAL PRODUCTS DIVISION

P.O. BOX M-1

SHORT HILLS, NEW JERSEY 07078

TELEPHONE (201) 467-8500

July 20, 1984

CERTIFIED MAIL P475 424 632

RETURN RECEIPT REQUESTED

Department of Natural Resources
Environmental Protection Division
270 Washington, S.W., Room 723
Atlanta, GA 30334

Attention: Mr. Tim Cash

Re: MOBIL CHEMICAL COMPANY
CHEMICAL PRODUCTS DIVISION
COVINGTON, GA PLANT
EPA ID #GAD 048711972
NOTIFICATION of OWNERSHIP CHANGE

JUL 25 1984
ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

Dear Mr. Cash:

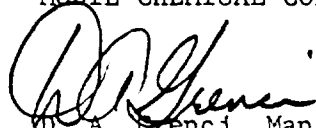
Effective July 31, 1984, ownership of the Mobil Chemical Company, Chemical Products Division Plant located at 9172 Industrial Drive, Covington, GA 30209 will be transferred to:

The Valspar Corporation
1101 Third Street South
Minneapolis, MN 55415
(612)-332-7371

EPA ID #GAD 048711972 should now be transferred to the Valspar Corporation. All future communications regarding this plant are to be sent to the new owners.

Very truly yours,

MOBIL CHEMICAL COMPANY


D. A. Stenci, Manager
Environmental Affairs

DAG:esu

cc: Herbert F. Denker, Secretary
Valspar Corporation
1101 Third Street South
Minneapolis, MN 55415

cc: Ms. Nell Keever
Environmental Protection Agency
Region IV - 345 Courtland St., NE
Atlanta, GA 30365



Tim
Robert
110
file
August 8, 1984

formerly Mobil Chem
The Valspar Corporation

150 J.F.K. Parkway/Short Hills, NJ 07078
Mailing Address: P.O. Box M-1/Short Hills, NJ 07078
201-467-8500

RECEIVED

AUG 14 1984

9/28

**ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH**

Certified Mail #P475424647
Return Receipt Requested

Department of Natural Resources
Environmental Protection Division
270 Washington Street, S.W. - Room 723
Atlanta, GA 30334

Attention: Mr. Tim Cash

Re: Mobil Chemical Company
Covington, GA Plant
EPA ID # GAD 048 711 972
Notification of Ownership Change

Dear Mr. Cash:

Effective July 31, 1984, ownership of the Mobil Chemical Company Plant located at 9172 Industrial Drive, Covington, GA 30209 has been transferred to:

The Valspar Corporation
1101 Third Street South
Minneapolis, MN 55415
(612) 332-7371

Mailing Address:
P.O. Box 1461
Minneapolis, MN 55415

EPA ID # GAD 048 711 972 should now be transferred to The Valspar Corporation. A copy of the revised "Notification of Hazardous Waste Activity" submitted to EPA Region IV is attached. All future communications regarding this plant are to be sent to the attention of the local plant manager. I can be reached at The Valspar Corporation, Short Hills, New Jersey office, should you require additional information.

Very truly yours,

THE VALSPAR CORPORATION

[Signature]
D. A. Grenci, Manager
Environmental Affairs

sd
Attachment

cc: Herbert F. Denker

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.
I. NAME OF INSTALLATION
II. INSTALLATION MAILING ADDRESS
III. LOCATION OF INSTALLATION

EPA ID # GAD 048 711 972

THE VALSPAR CORPORATION

9172 Industrial Drive

Covington, GA 30209

INSTRUCTIONS: If you received a preprint label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprint label, complete all items. "Installation" means single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED
(yr., mo., & day)

G A D 0 4 8 7 1 1 9 7 2

I. NAME OF INSTALLATION

T H E V A L S P A R C O R P O R A T I O N

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

P . O . B O X 7 1

CITY OR TOWN

C O V I N G T O N

ST.

G A

ZIP CODE

3 0 2 0 8

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

9 1 7 2 I N D U S T R I A L D R I V E

CITY OR TOWN

C O V I N G T O N

ST.

G A

ZIP CODE

3 0 2 0 8

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

G R E N C I D . A . M G R E N V I R A F F A I R S

PHONE NO. (area code & no.)

2 0 1 - 4 6 7 - 8 5 0 0

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

T H E V A L S P A R C O R P O R A T I O N

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)F - FEDERAL
M - NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION☐ B. TRANSPORTATION (complete Item VII)☐ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☐ A. FIRST NOTIFICATION☒ B. SUBSEQUENT NOTIFICATION (complete Item C)

C. INSTALLATION'S EPA I.D. NO.

G A D 0 4 8 7 1 1 9 7 2

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

I.D. - FOR OFFICIAL USE ONLY												
W	N	C	D	0	4	1	4	1	5	0	1	9
1	1	1	1	1	1	1	1	1	1	1	1	1

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K 0 8 6	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE E.S. Pachasa	NAME & OFFICIAL TITLE (type or print) E.S. Pachasa, Plant Manager	DATE SIGNED 7/24/84
---------------------------	--	------------------------

EPA Form 8700-12 (6-80) REVERSE

NOTE: Change in Ownership Only



JOE D. TANNER
Commissioner

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION

270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

J. LEONARD LEOBETTER
Division Director

October 29, 1984

Mr. G. A. Greci, Manager
Environmental Affairs
The Valspar Corporation
P. O. Box 1461
Minneapolis, MN 55415

RE: Ownership Change from Mobil Chem Co. - Covington for;
GAD048711972

Dear Mr. Greci:

We are in receipt of your notification of ownership change from Mobil Chemical to Valspar Corporation.

Our office has made the necessary changes to our files and all future correspondence will be directed to the Valspar Corporation.

If further assistance is needed, please feel free to call this office at 404/656-7802.

Sincerely,

Gwendolyn C. Glass
Environmental Specialist
Industrial & Hazardous Waste
Management Program

GCG:jrh:0307R

File: Valspar Corporation (R)

Georgia Environmental Protection Division
GEORGIA ANNUAL HAZARDOUS WASTE REPORT
Reporting Period January 1 thru
FORM A
IDENTIFICATION

Please print/type with Elite type (12 characters per inch)

I. EPA I.D. NUMBER G A D 0 4 6 7 1 1 9 7 2

II. NAME OF INSTALLATION

T H E _ V A L S P A R _ C O R P O R A T I O N / M O B I L _ C H E M I C A L _ C O .

III. INSTALLATION MAILING ADDRESS

9 3 0 3 _ I N D U S T R I A L _ D R I V E _ _ _ _ _
Street or P.O.Box
C O V I N G T O N _ G E O R G I A _ _ 3 0 2 0 9 _ _ _ _
City or Town State Zip Code

IV. LOCATION OF INSTALLATION (if different than Section III. above)

S A M E _ _ _ _ _
Street or Route Number
_ _ _ _ _ _ _ _ _ _ _ _ _ _ _
City or Town State Zip Code
_ _ _ _ _
County

V. INSTALLATION CONTACT

A U T R _ _ _ G E R A L D _ _ _ _ _
Name (last and first)
4 0 4 _ 7 3 7 _ 0 0 3 1 _
Phone No. (Area code & number)

VI. PROCESS IN USE (Check as appropriate)

SQG	GEN	TRN	T01	T02	T03	T04	S01	S02	S03	S04	D80	D81	D83
	X												

X PRIVATE (Handle only self generated waste) COMMERCIAL (Handle waste generated from other sources)

VII. CERTIFICATION - I certify under penalty of Law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

D. J. Zunic, Operations Manager
Print/Type Name & Title

[Signature]
Signature of
Authorized Representative

1/9/85
Date Signed

SELF-GENERATED HAZARDOUS WASTE AND ITS DISPOSITION

	D, 0, 0, 1					
	F, 0, 0, 5					
1. EPA HAZARDOUS WASTE NUMBER						TOTAL
2. Un Hand, Un-site on January 1, 1984	0.593					0.593
3. Generated during 1983	12.014					12.014
4. TOTAL AMOUNT FOR WHICH TO ACCOUNT	12.607					12.607
5. Shipped to State of Tennessee	12.607					12.607
6. Shipped to State of						
7. Shipped to State of						
8. Shipped to State of						
9. Shipped to Georgia Facility for Use, Reuse, Recycle or Reclaim						
10. Shipped to Georgia Facility for Treatment, Storage, or Disposal						
11. Treated Un-site						
12. Treatment Code						
13. Disposed of Un-site						
14. Disposal Code						
15. Un Hand, Un-site on Jan. 1, 1985	0.00					0.00
16. Storage Code						
17. Other (Explain)						
18. TOTAL AMOUNT OF DISPOSITION	12.607					12.607

Mobil Chemical Company

PACKAGING COATINGS DEPARTMENT

P O BOX 71
COVINGTON, GEORGIA 30209
TELEPHONE (404) 787-0031

JAN 15 1985

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Industrial & Hazardous Waste Management Program
Environmental Protection Division
Room 724
270 Washington Street, S.W.
Atlanta, Georgia 30334

ATTENTION: ANNUAL REPORTS

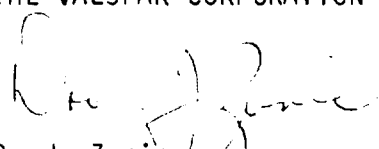
Dear Sirs:

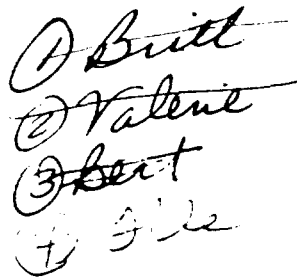
Enclosed is the Hazardous Waste Generator Annual Report for the Mobil Chemical Company, Chemical Products Division, and the Valspar Corporation, Covington Plant for the year of 1984.

If any additional information is needed, please do not hesitate to contact me.

Yours truly,

THE VALSPAR CORPORATION


D. J. Zunic
Operations Manager



POOR LEGIBILITY

**PORTIONS OF THIS DOCUMENT
MAY BE UNREADABLE, DUE TO
THE QUALITY OF THE
ORIGINAL**

PRELIMINARY ASSESSMENT
TELEPHONE CONVERSATION RECORD

Site Name: Mobil Chemical Co.-Chemical Prod. I.D.# GAD048711972

Location Address: 9172 Industrial Drive; Covington, Ga. 30209

Phone: () - .

Contact: Mr. Dominic A. Grenci Title: Manager, Environmental Affairs

Address: P.O. Box M-1; Short Hills, New Jersey 07078 (MOBIL CHEMICAL COMPANY)

Phone: (201) 467 - 8500 ext. 333

Authority: Section 3012 of CERCLA, Comprehensive Environmental Response, Compensation and Liability Act.

Facility has notified EPA via - RCRA 3001 site is in HWDMS
CERCLA 103c site is in NOTIS

Need Information concerning waste generation and disposal prior to Nov. 19, 1980.

How long has facility been in operation? 1973

What kind of wastes were generated and how much?

Solvent wastes 25 tons - recycled

Non-hazardous paper products

Was it disposed on site and where?

No, wastes were never disposed of on site.

Was it transported offsite and where?

Yes, wastes were reclaimed (no info as to where)

Was it treated and how?

No, was never treated sent off site for recycling.

Have there been any past spills? Describe.

No, there have been no spills to the best of his knowledge.

Date of call: 10-24-85 Time: 10:20 AM (Left Message)

* Company is now owned by Valpar Corporation who took over Aug 1st 1984 (over)

10-25-85

8:35 AM. Mr. Grenci returned call

Hilda Kroules

New company did return site ID number
GAD D48 711 972



POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION SITE NUMBER

GA 048711977

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME	B. STREET	
C. CITY	D. STATE	E. ZIP CODE

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED - NO HAZARD	X				
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)					
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR DISPOSITION

no on site disposal

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)	G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)
---	---

H. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)
---------	---------------------	---------------------------

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

--

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION (mo., day, & yr.)	3. TO BE PERFORMED BY (EPA, Contractor, State, etc.)	4. ESTIMATED MANHOURS	5. REMARKS
A. TYPE OF SITE INSPECTION				
(1)				
(2)				
(3)				
B. TYPE OF MONITORING				
(1)				
(2)				
C. TYPE OF SAMPLING				
(1)				
(2)				